

RECORDING REQUESTED BY
Old Republic Title Company

WHEN RECORDED MAIL TO

Name
Address
City, State Zip

Title Order No.
Escrow No.

AFFIDAVIT - DEATH OF BENEFICIARY

STATE OF CALIFORNIA
County of **Los Angeles** }ss.

, of legal age, being first duly sworn, deposes and says:

That _____, the decedent mentioned in the attached certified copy of Certificate of Death, is the same person as _____ named as one of the parties in that certain Deed of Trust dated _____, executed by _____ to _____, and recorded on _____, in Book/Reel **N/A**, at Page/Image **N/A**, Series/Instrument Number _____ of Official Records of **Los Angeles** County, California, covering the following described real property in the City of _____, in said County, State of California:

As shown in Exhibit "A" attached hereto and made a part hereof

A.P.N.

Dated:

SUBSCRIBED AND SWORN TO before me

Notary Stamp or Seal

this _____ day of _____, _____

NOTARY SIGNATURE

NOTARY'S NAME (typed or legibly printed)